

1982 CENSUS OF TRANSPORTATION
TRUCK INVENTORY AND USE SURVEY

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
FORM

TC-9501

O.M.B. APPROVAL NO. 0607-0390: EXPIRES 12/84

NOTICE—Response to this inquiry is required by law (title 13, U.S. Code). By the same law, your report to the Census Bureau is confidential. It may be seen only by sworn Census employees and may be used only for statistical purposes. The law also provides that copies retained in your files are immune from legal process.

Please complete this form and RETURN TO

BUREAU OF THE CENSUS
1201 East Tenth Street
Jeffersonville, Indiana 47134

DUE DATE: 15 days after receipt of form

Important — Please read

All questions on this form refer to the vehicle described below and its use during the past 12 months (or the last 12 months you operated it). If there are errors in the vehicle registration information, consult the instruction sheet before continuing with the questionnaire.

ESTIMATES ARE ACCEPTABLE.

In correspondence pertaining to this report,
please refer to this Census File Number (CFN)

Please correct errors in name, address, and ZIP code. ENTER street and number if not shown.

CENSUS USE	1	2	3	4	5	6	7																											
REGISTRATION INFORMATION																																		
Make of vehicle	Year of model	State	License number	Vehicle identification number (VIN)																														
101	102	103	104	105																														
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 1 - Is this vehicle still in your possession?</p> <p>201 <input type="checkbox"/> YES - Are you the - 202 <input type="checkbox"/> Owner? } SKIP to item 2 and continue with questionnaire</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Lessee?</p> <p>2 <input type="checkbox"/> NO - Please continue with this questionnaire, answering each item according to how you used the vehicle during the last 12 months you owned (or leased) it. Continue with items 1a and b.</p> <p>a. When did you dispose of this vehicle?</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">Enter figures only _____</td> <td style="width: 20%; text-align: center;">Month</td> <td style="width: 20%; text-align: center;">Year</td> </tr> <tr> <td></td> <td style="text-align: center;">203</td> <td></td> </tr> </table> <p>b. How did you dispose of this vehicle?</p> <p>204 <input type="checkbox"/> Sold it (or gave it away)</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Junked or scrapped it</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> Returned to leasing company</p> </div> <div style="width: 48%;"> <p>Item 7a - What was the average weight of this vehicle as it was most often operated?</p> <p>An estimate is acceptable.</p> <p>b. How often was this vehicle carrying payloads that filled -</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">Less than half its maximum cargo size</td> <td style="width: 20%; text-align: center;">Percent</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">317</td> <td></td> </tr> <tr> <td>Less than half its maximum cargo weight</td> <td style="text-align: center;">318</td> <td></td> </tr> </table> </div> </div>								Enter figures only _____	Month	Year		203		Less than half its maximum cargo size	Percent			317		Less than half its maximum cargo weight	318													
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<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 2 - When did you obtain this vehicle?</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">Enter figures only _____</td> <td style="width: 20%; text-align: center;">Month</td> <td style="width: 20%; text-align: center;">Year</td> </tr> <tr> <td></td> <td style="text-align: center;">206</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <p>Item 8 - During the past year, did you attach any trailers to this vehicle?</p> <p>304 <input type="checkbox"/> YES - Continue with items 8a, b, and c below</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> NO - SKIP to item 9</p> </div> </div>								Enter figures only _____	Month	Year		206																						
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<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 3 - How did you obtain this vehicle?</p> <p>206 <input type="checkbox"/> Purchased it new</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Purchased it used (or otherwise acquired) ... } SKIP to item 4</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> Leased or rented it from someone else - Continue with items 3a and b</p> <p>a. How was this vehicle leased or rented?</p> <p>207 <input type="checkbox"/> Without a driver</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> With a driver</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> With an owner-operator as driver</p> <p>b. Was this a long-term lease or rental agreement (12 months or more)?</p> <p>208 <input type="checkbox"/> YES - What type was it?</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Financing (no maintenance)</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> Financing and full maintenance</p> <p style="margin-left: 20px;">4 <input type="checkbox"/> Other</p> <p style="margin-left: 20px;">5 <input type="checkbox"/> NO</p> </div> <div style="width: 48%;"> <p>Item 7b - What was the average weight of this vehicle as it was most often operated?</p> <p>An estimate is acceptable.</p> <p>c. What was the loaded weight of the trailer most often attached to the vehicle?</p> <p>An estimate is acceptable.</p> <p>Item 9 - What kind of fuel does this vehicle use?</p> <p>321 <input type="checkbox"/> Gasoline</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Diesel</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> Liquefied petroleum gas (LPG)</p> <p style="margin-left: 20px;">4 <input type="checkbox"/> Other - Specify fuel _____</p> </div> </div>																																		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 4 - Did you lease or rent out this vehicle to anyone else?</p> <p>209 <input type="checkbox"/> YES - Continue with items 4a and b</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> NO - SKIP to item 5</p> <p>a. How was it leased or rented out?</p> <p>210 <input type="checkbox"/> Without a driver</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> With a driver</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> With an owner-operator as driver</p> <p>b. Was this a long-term lease or rental agreement (12 months or more)?</p> <p>211 <input type="checkbox"/> YES - What type was it?</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Financing (no maintenance)</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> Financing and full maintenance</p> <p style="margin-left: 20px;">4 <input type="checkbox"/> Other</p> <p style="margin-left: 20px;">5 <input type="checkbox"/> NO</p> </div> <div style="width: 48%;"> <p>Item 10 - How many cylinders does this vehicle have?</p> <p>322 <input type="checkbox"/> 4 cylinders</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> 6 cylinders</p> <p style="margin-left: 20px;">3 <input type="checkbox"/> 8 cylinders</p> <p style="margin-left: 20px;">4 <input type="checkbox"/> Other - Specify unit _____</p> </div> </div>																																		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 5 - What is the body type of this vehicle?</p> <p>313 <input type="checkbox"/> Pickup</p> <p style="margin-left: 20px;">02 <input type="checkbox"/> Panel or compact van</p> <p style="margin-left: 20px;">24 <input type="checkbox"/> Utility (For example: Bronco, Blazer, Jeep, CJ - 5, 7, etc.)</p> <p style="margin-left: 20px;">25 <input type="checkbox"/> Station wagon built on truck chassis (For example: Suburban, Wagoneer, etc.)</p> <p style="margin-left: 20px;">80 <input type="checkbox"/> Other - If the above descriptions do not match the body type of this vehicle, please describe the body type in detail.</p> </div> <div style="width: 48%;"> <p>Item 11 - What is the size (displacement) of your engine? Enter cubic inches, cubic centimeters, or liters, whichever is applicable.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Cubic inches (CI)</td> <td style="width: 33%; text-align: center;">OR</td> <td style="width: 33%;">Cubic centimeters (CC)</td> <td style="width: 33%; text-align: center;">OR</td> <td style="width: 33%;">Liters (L)</td> </tr> <tr> <td style="text-align: center;">323</td> <td></td> <td style="text-align: center;">324</td> <td></td> <td style="text-align: center;">325</td> </tr> </table> </div> </div>								Cubic inches (CI)	OR	Cubic centimeters (CC)	OR	Liters (L)	323		324		325																	
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<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 12 - What is the horsepower rating of this vehicle's engine?</p> <p>326 _____</p> </div> <div style="width: 48%;"> <p>Item 13 - What kind of transmission does this vehicle have?</p> <p>327 <input type="checkbox"/> Manual</p> <p style="margin-left: 20px;">2 <input type="checkbox"/> Automatic</p> </div> </div>																																		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Item 14 - Does this vehicle have any of the following?</p> <p>Mark (X) as many as apply.</p> <p>329 <input type="checkbox"/> Radial tires</p> <p style="margin-left: 20px;">09 <input type="checkbox"/> Power steering</p> <p style="margin-left: 20px;">10 <input type="checkbox"/> Air conditioning</p> <p style="margin-left: 20px;">12 <input type="checkbox"/> 4-wheel drive</p> <p style="margin-left: 20px;">13 <input type="checkbox"/> Front-wheel drive</p> </div> <div style="width: 48%;"> <p>Item 15 - Who performed the general maintenance and major overhauls on this vehicle?</p> <p>Mark (X) as many as apply</p> <table style="width: 100%;"> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">General maintenance</th> <th style="width: 20%; text-align: center;">Major overhauls</th> </tr> <tr> <td>330</td> <td style="text-align: center;">331</td> <td style="text-align: center;">332</td> </tr> <tr> <td>Yourselves</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Your company's own maintenance facilities</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Dealership's service department</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Leasing company</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Independent garage or private mechanic</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Component distributorship</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other - Specify _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> </div> </div>									General maintenance	Major overhauls	330	331	332	Yourselves	<input type="checkbox"/>	<input type="checkbox"/>	Your company's own maintenance facilities	<input type="checkbox"/>	<input type="checkbox"/>	Dealership's service department	<input type="checkbox"/>	<input type="checkbox"/>	Leasing company	<input type="checkbox"/>	<input type="checkbox"/>	Independent garage or private mechanic	<input type="checkbox"/>	<input type="checkbox"/>	Component distributorship	<input type="checkbox"/>	<input type="checkbox"/>	Other - Specify _____	<input type="checkbox"/>	<input type="checkbox"/>
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<p>Item 6 - What is the overall length of this vehicle (distance from front bumper to rear of vehicle)?</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">_____</td> <td style="width: 20%; text-align: center;">Feet</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">314</td> <td></td> </tr> </table>								_____	Feet			314																						
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PENALTY FOR FAILURE TO REPORT

CONTINUE ON PAGE 2

<p>Item 16 – How many miles was this vehicle driven during the past 12 months? An estimate is acceptable. NOTE – If driven less than 12 months, please estimate mileage for a full year.</p> <p style="text-align: right;">332</p> <p>Item 17 – How many miles has this vehicle been driven since it was new? NOTE – If it is no longer in your possession, please estimate the total lifetime mileage at the time you last operated it. If the odometer/speedometer is broken, please give your best estimate. If the odometer has turned over (100,000 + miles), please enter the total figure.</p> <p style="text-align: right;">333</p> <p>Item 18 – How many miles-per-gallon (MPG) did this vehicle average during the last year? (Use tenths, if available.)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Miles</td> <td style="width: 50%;">Tenths</td> </tr> <tr> <td style="text-align: center;">10</td> <td style="text-align: center;">5</td> </tr> </table> <p>Example: 10.5 MPG should be entered as</p> <p>Enter miles per gallon → 334</p> <p>Item 19 – Where was the home base of this vehicle?</p> <p>350 City _____</p> <p>351 County _____ 352 State _____ 353 ZIP code _____</p> <p>Item 20 – What percent of annual mileage was driven OUTSIDE the home base state? An estimate is acceptable.</p> <p style="text-align: right;">354 %</p> <p>Item 21 – What PERCENTAGE of this vehicle's ANNUAL MILEAGE was accounted for by the type of trips listed below? (If all trips were within one range, enter 100%. If more than one range is applicable, be sure that percentages add up to 100%.)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Trips off-the-road, little travel on public roads</td> <td style="width: 20%;">360 %</td> </tr> <tr> <td>Trips within a 50 mile radius of vehicle's home base</td> <td>361 %</td> </tr> <tr> <td>Trips within a 50–200 mile radius of vehicle's home base</td> <td>362 %</td> </tr> <tr> <td>Trips beyond a 200 mile radius of vehicle's home base</td> <td>363 %</td> </tr> <tr> <td>TOTAL – Should equal 100%</td> <td style="text-align: center;">100%</td> </tr> </table> <p>Item 22 – Which of the following best describes the primary way this vehicle was operated?</p> <p>401 NEVER FOR HIRE</p> <p>1 <input type="checkbox"/> BUSINESS USE – Operated by and for a private business (including self-employees) or a company; used in related activities of that business (including transportation of personnel) SKIP to item 23</p> <p>2 <input type="checkbox"/> PERSONAL TRANSPORTATION – Operated as a personal-use vehicle in place of an automobile for pleasure driving, travel to work, etc. (NO BUSINESS USE) SKIP to item 26</p> <p>3 <input type="checkbox"/> MIXED – A mixture of both business use and personal transportation SKIP to item 23</p> <p>Percent business 403 %</p> <p>411 ALWAYS FOR HIRE – ICC regulated?</p> <p>1 <input type="checkbox"/> YES</p> <p>2 <input type="checkbox"/> NO</p> <p>FOR HIRE – Indicate below the type of for hire operation (SEE INSTRUCTION SHEET FOR FURTHER INFORMATION.)</p> <p>401 a. Operation type</p> <p>406 b. Jurisdiction served _____</p> <p>407 c. Kind of carrier _____</p> <p>Item 23 – Which of the following best describes your business (or the part of your business in which the vehicle was used)? If vehicle was leased, indicate business of lessee.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>414 01 <input type="checkbox"/> AGRICULTURAL ACTIVITIES</p> <p>02 <input type="checkbox"/> FORESTRY OR LUMBERING ACTIVITIES</p> <p>03 <input type="checkbox"/> CONSTRUCTION WORK</p> <p>04 <input type="checkbox"/> CONTRACTOR ACTIVITIES OR SPECIAL TRADES (painting, plumbing, electrical work, masonry, carpentry, etc.)</p> <p>05 <input type="checkbox"/> MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</p> <p>06 <input type="checkbox"/> WHOLESALE TRADE</p> <p>07 <input type="checkbox"/> RETAIL TRADE</p> <p>08 <input type="checkbox"/> PERSONAL SERVICES – hotel operations, landscaping, repair (except plumbing, electrical work, etc. – see "Contractor Activities"), laundry, advertising, entertainment, etc.</p> <p>09 <input type="checkbox"/> UTILITIES – operations or service of public utilities (telephone, gas, electric, etc.)</p> </td> <td style="width: 50%; vertical-align: top;"> <p>10 <input type="checkbox"/> MINING OR QUARRY ACTIVITIES – used to assist in the extraction of natural resources or in hauling to processors</p> <p>11 <input type="checkbox"/> DAILY RENTAL – rented out, without a driver, to someone else on a daily or short-term basis</p> <p>12 <input type="checkbox"/> GOVERNMENTAL OPERATIONS</p> <p>13 <input type="checkbox"/> NOT IN USE – vehicle idle, wrecked, awaiting repair, etc., for more than 90 days.</p> <p>14 <input type="checkbox"/> FOR HIRE TRANSPORTATION – includes small package delivery</p> <p>15 <input type="checkbox"/> OTHER – Please describe in detail _____</p> </td> </tr> </table> <p>Item 24 – At any time during the past 12 months, was this vehicle (or combination) used to haul hazardous materials in quantities large enough to require a special placard placed on the vehicle due to the Code of Federal Regulations, title 49, Transportation?</p> <p>438 1 <input type="checkbox"/> YES – Continue with Items 24a and b</p> <p>2 <input type="checkbox"/> NO – SKIP to item 25</p> <p>a. What type(s) of hazardous materials were carried by this vehicle? Mark (X) as many as apply.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>439 1 <input type="checkbox"/> Flammables or combustibles</p> <p>2 <input type="checkbox"/> Acids, poisons, caustics, etc.</p> <p>3 <input type="checkbox"/> Explosives</p> </td> <td style="width: 50%; vertical-align: top;"> <p>4 <input type="checkbox"/> Radioactive materials</p> <p>5 <input type="checkbox"/> Hazardous waste</p> <p>6 <input type="checkbox"/> Hazardous materials not listed above</p> </td> </tr> </table> <p>b. Approximately what percent of this vehicle's annual mileage was accounted for by carrying these hazardous materials?</p> <p>440 1 <input type="checkbox"/> Below 25% 2 <input type="checkbox"/> 25–49% 3 <input type="checkbox"/> 50–74% 4 <input type="checkbox"/> 75–100%</p>	Miles	Tenths	10	5	Trips off-the-road, little travel on public roads	360 %	Trips within a 50 mile radius of vehicle's home base	361 %	Trips within a 50–200 mile radius of vehicle's home base	362 %	Trips beyond a 200 mile radius of vehicle's home base	363 %	TOTAL – Should equal 100%	100%	<p>414 01 <input type="checkbox"/> AGRICULTURAL ACTIVITIES</p> <p>02 <input type="checkbox"/> FORESTRY OR LUMBERING ACTIVITIES</p> <p>03 <input type="checkbox"/> CONSTRUCTION WORK</p> <p>04 <input type="checkbox"/> CONTRACTOR ACTIVITIES OR SPECIAL TRADES (painting, plumbing, electrical work, masonry, carpentry, etc.)</p> <p>05 <input type="checkbox"/> MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</p> <p>06 <input type="checkbox"/> WHOLESALE TRADE</p> <p>07 <input type="checkbox"/> RETAIL TRADE</p> <p>08 <input type="checkbox"/> PERSONAL SERVICES – hotel operations, landscaping, repair (except plumbing, electrical work, etc. – see "Contractor Activities"), laundry, advertising, entertainment, etc.</p> <p>09 <input type="checkbox"/> UTILITIES – operations or service of public utilities (telephone, gas, electric, etc.)</p>	<p>10 <input type="checkbox"/> MINING OR QUARRY ACTIVITIES – used to assist in the extraction of natural resources or in hauling to processors</p> <p>11 <input type="checkbox"/> DAILY RENTAL – rented out, without a driver, to someone else on a daily or short-term basis</p> <p>12 <input type="checkbox"/> GOVERNMENTAL OPERATIONS</p> <p>13 <input type="checkbox"/> NOT IN USE – vehicle idle, wrecked, awaiting repair, etc., for more than 90 days.</p> <p>14 <input type="checkbox"/> FOR HIRE TRANSPORTATION – includes small package delivery</p> <p>15 <input type="checkbox"/> OTHER – Please describe in detail _____</p>	<p>439 1 <input type="checkbox"/> Flammables or combustibles</p> <p>2 <input type="checkbox"/> Acids, poisons, caustics, etc.</p> <p>3 <input type="checkbox"/> Explosives</p>	<p>4 <input type="checkbox"/> Radioactive materials</p> <p>5 <input type="checkbox"/> Hazardous waste</p> <p>6 <input type="checkbox"/> Hazardous materials not listed above</p>	<p>Item 25 – From the following list of products, materials, and equipment, indicate which item or items this vehicle carried. Write in the approximate percentage of the vehicle's annual mileage that was accounted for while carrying loads and while empty (backhauls, etc.). Be sure that percentages add up to 100%. (See instruction sheet for further explanation and examples.)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">a. PRODUCTS, EQUIPMENT, MATERIALS, ETC.</th> <th style="width: 20%;">Percentage of annual mileage</th> </tr> </thead> <tbody> <tr> <td>(1) Agricultural and Food Products</td> <td>415 %</td> </tr> <tr> <td>(a) Live animals – cattle, horses, poultry, hogs, etc.</td> <td>416 %</td> </tr> <tr> <td>(b) Fresh farm products – grain, crops, flowers, nursery stock, raw milk, raw tobacco, etc.</td> <td>417 %</td> </tr> <tr> <td>(c) Processed foods – canned goods, prepared meats, frozen foods, beverages, dairy products, tobacco products, etc.</td> <td>418 %</td> </tr> <tr> <td>(2) Mining Products, Unrefined – crude oil, coal, metal ores.</td> <td>419 %</td> </tr> <tr> <td>(3) Building Materials – gravel, sand, concrete, glass, etc. (except cut lumber – see "Lumber")</td> <td>420 %</td> </tr> <tr> <td>(4) Forestry, Wood, and Paper Products</td> <td>421 %</td> </tr> <tr> <td>(a) Logs and forest products – except cut lumber and fabricated wood products (see below)</td> <td>422 %</td> </tr> <tr> <td>(b) Lumber and fabricated wood products – except furniture (see (7) below)</td> <td>423 %</td> </tr> <tr> <td>(c) Paper and paper products</td> <td>424 %</td> </tr> <tr> <td>(5) Chemicals, Petroleum, and Allied Products</td> <td>425 %</td> </tr> <tr> <td>(a) Chemicals and/or drugs (including fertilizers, pesticides, cosmetics, paints, etc.)</td> <td>426 %</td> </tr> <tr> <td>(b) Petroleum and petroleum products</td> <td>427 %</td> </tr> <tr> <td>(c) Plastics and/or rubber products</td> <td>428 %</td> </tr> <tr> <td>(6) Metals and Metal Products</td> <td>429 %</td> </tr> <tr> <td>(a) Primary metal products – pipes, ingots, billets, sheets, etc.</td> <td>430 %</td> </tr> <tr> <td>(b) Fabricated metal products – except machinery or transportation equipment (see below)</td> <td>431 %</td> </tr> <tr> <td>(c) Machinery – electrical or nonelectrical</td> <td>432 %</td> </tr> <tr> <td>(d) Transportation equipment and parts</td> <td>433 %</td> </tr> <tr> <td>(7) Other Manufactured Products</td> <td>434 %</td> </tr> <tr> <td>(a) Furniture (wood and nonwood) and/or hardware – not involved in household moving</td> <td>435 %</td> </tr> <tr> <td>(b) Textiles and apparel – fibers, leather goods, carpets, clothing, etc.</td> <td>436 %</td> </tr> <tr> <td>(8) Miscellaneous</td> <td>437 %</td> </tr> <tr> <td>(a) Moving of household and office furniture – from home, offices, etc., under contract</td> <td>438 %</td> </tr> <tr> <td>(b) Miscellaneous tools and/or parts for specialized use, as in a craftsman's vehicle – traveling workshop for plumbers, carpenters, road service crews, etc.</td> <td>439 %</td> </tr> <tr> <td>(c) Mixed cargo, general freight</td> <td>440 %</td> </tr> <tr> <td>(d) Scrap, garbage, trash</td> <td>441 %</td> </tr> <tr> <td>(9) Other (not elsewhere classified) – Please describe in detail _____</td> <td>442 %</td> </tr> <tr> <td>b. 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Does this person have records on (or knowledge of) the daily activities of driver (stops, weight of individual shipments, destinations of shipments, etc.)?</p> <p><input type="checkbox"/> YES 2 <input type="checkbox"/> NO</p> <p>Name _____</p> <p>Address (Number and street) _____</p> <p>City _____ State _____ ZIP code _____</p> <p>Daytime telephone number _____ Area code _____ Number _____ Extension _____</p> <p>If this vehicle has a fleet number, please enter it here _____</p>	a. PRODUCTS, EQUIPMENT, MATERIALS, ETC.	Percentage of annual mileage	(1) Agricultural and Food Products	415 %	(a) Live animals – cattle, horses, poultry, hogs, etc.	416 %	(b) Fresh farm products – grain, crops, flowers, nursery stock, raw milk, raw tobacco, etc.	417 %	(c) Processed foods – canned goods, prepared meats, frozen foods, beverages, dairy products, tobacco products, etc.	418 %	(2) Mining Products, Unrefined – crude oil, coal, metal ores.	419 %	(3) Building Materials – gravel, sand, concrete, glass, etc. (except cut lumber – see "Lumber")	420 %	(4) Forestry, Wood, and Paper Products	421 %	(a) Logs and forest products – except cut lumber and fabricated wood products (see below)	422 %	(b) Lumber and fabricated wood products – except furniture (see (7) below)	423 %	(c) Paper and paper products	424 %	(5) Chemicals, Petroleum, and Allied Products	425 %	(a) Chemicals and/or drugs (including fertilizers, pesticides, cosmetics, paints, etc.)	426 %	(b) Petroleum and petroleum products	427 %	(c) Plastics and/or rubber products	428 %	(6) Metals and Metal Products	429 %	(a) Primary metal products – pipes, ingots, billets, sheets, etc.	430 %	(b) Fabricated metal products – except machinery or transportation equipment (see below)	431 %	(c) Machinery – electrical or nonelectrical	432 %	(d) Transportation equipment and parts	433 %	(7) Other Manufactured Products	434 %	(a) Furniture (wood and nonwood) and/or hardware – not involved in household moving	435 %	(b) Textiles and apparel – fibers, leather goods, carpets, clothing, etc.	436 %	(8) Miscellaneous	437 %	(a) Moving of household and office furniture – from home, offices, etc., under contract	438 %	(b) Miscellaneous tools and/or parts for specialized use, as in a craftsman's vehicle – traveling workshop for plumbers, carpenters, road service crews, etc.	439 %	(c) Mixed cargo, general freight	440 %	(d) Scrap, garbage, trash	441 %	(9) Other (not elsewhere classified) – Please describe in detail _____	442 %	b. 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<p>414 01 <input type="checkbox"/> AGRICULTURAL ACTIVITIES</p> <p>02 <input type="checkbox"/> FORESTRY OR LUMBERING ACTIVITIES</p> <p>03 <input type="checkbox"/> CONSTRUCTION WORK</p> <p>04 <input type="checkbox"/> CONTRACTOR ACTIVITIES OR SPECIAL TRADES (painting, plumbing, electrical work, masonry, carpentry, etc.)</p> <p>05 <input type="checkbox"/> MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</p> <p>06 <input type="checkbox"/> WHOLESALE TRADE</p> <p>07 <input type="checkbox"/> RETAIL TRADE</p> <p>08 <input type="checkbox"/> PERSONAL SERVICES – hotel operations, landscaping, repair (except plumbing, electrical work, etc. – see "Contractor Activities"), laundry, advertising, entertainment, etc.</p> <p>09 <input type="checkbox"/> UTILITIES – operations or service of public utilities (telephone, gas, electric, etc.)</p>	<p>10 <input type="checkbox"/> MINING OR QUARRY ACTIVITIES – used to assist in the extraction of natural resources or in hauling to processors</p> <p>11 <input type="checkbox"/> DAILY RENTAL – rented out, without a driver, to someone else on a daily or short-term basis</p> <p>12 <input type="checkbox"/> GOVERNMENTAL OPERATIONS</p> <p>13 <input type="checkbox"/> NOT IN USE – vehicle idle, wrecked, awaiting repair, etc., for more than 90 days.</p> <p>14 <input type="checkbox"/> FOR HIRE TRANSPORTATION – includes small package delivery</p> <p>15 <input type="checkbox"/> OTHER – Please describe in detail _____</p>																																																																																												
<p>439 1 <input type="checkbox"/> Flammables or combustibles</p> <p>2 <input type="checkbox"/> Acids, poisons, caustics, etc.</p> <p>3 <input type="checkbox"/> Explosives</p>	<p>4 <input type="checkbox"/> Radioactive materials</p> <p>5 <input type="checkbox"/> Hazardous waste</p> <p>6 <input type="checkbox"/> Hazardous materials not listed above</p>																																																																																												
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